Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Filing at a Glance

Company: NCRIC, Inc.

Product Name: Health Care Professional Rates SERFF Tr Num: PCWA-125650141 State: District of Columbia

and Rules Manual

TOI: 11.1 Medical Malpractice - Claims Made SERFF Status: Closed-APPROVEDState Tr Num:

Only

Sub-TOI: 11.1023 Physicians & Surgeons Co Tr Num: DC-PP-0708 State Status:

Filing Type: Rule Reviewer(s): Robert Nkojo

Author: LaQuita Goodwin Disposition Date: 07/09/2008

Date Submitted: 05/16/2008 Disposition Status: APPROVED

State Filing Description:

General Information

Project Name: Payment Plans Status of Filing in Domicile:

Project Number: Domicile Status Comments: None

Reference Organization: None Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 07/09/2008

State Status Changed: Deemer Date:

Created By: LaQuita Goodwin Submitted By: LaQuita Goodwin

Corresponding Filing Tracking Number:

Filing Description:

I submit for your review and approval the premium payment plans for the Health Care Professionals Rates and Rules Manual, which is used for physicians, surgeons, dentists and allied health professionals. I request the effective date of July 1, 2008 for this filing submission.

Please find attached the manual pages that will be used for the dental program and the physicians and surgeons program. If you have any questions during the review process, please let me know.

Thank you.

Company and Contact

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Filing Contact Information

 100 Brookwood Place
 205-877-4426 [Phone]

 Birmingham, AL 35209
 205-414-2887 [FAX]

Filing Company Information

NCRIC, Inc. CoCode: 41149 State of Domicile: District of

Columbia

100 Brookwood Place Group Code: 2698 Company Type: Property &

Casualty

State ID Number: 08

Birmingham, AL 35209 Group Name: ProAssurance

(205) 877-4426 ext. [Phone] FEIN Number: 52-1194407

Filing Fees

Fee Required? No Retaliatory? No

Fee Explanation:

Per Company: No

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Robert Nkojo	07/09/2008	07/09/2008

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Disposition

Disposition Date: 07/09/2008

Effective Date (New):

Effective Date (Renewal):

Status: APPROVED

Comment:

Rate data does NOT apply to filing.

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter All Filings		No
Supporting Document	Consulting Authorization		No
Supporting Document	Actuarial Certification (P&C)		No
Supporting Document	District of Columbia and Countrywide		No
	Experience for the Last 5 Years (P&C)		
Supporting Document	District of Columbia and Countrywide		No
	Loss Ratio Analysis (P&C)		
Supporting Document	Schedule of Rates or Methodology (P&C)		No
Rate	Dental Manual Page		No
Rate	P&S Manual Page		No

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Rate/Rule Schedule

Schedule Item Status:	_			State Filing Attachments	
	Dental Manual Page	Page 36	Replacement	Company Filing # DC0107	Page 36 Payment plans eff 7-1-08.PDF
	P&S Manual Page	Page 48	Replacement	Company Filing #	Page 48 Payment plans eff 7-1-08.PDF

II. EXCEPTIONS

A. Policy Issuance

1. Item III, Premium Payments, is hereby added to Section 1, Introduction, as follows:

III. PREMIUM PAYMENTS

- 1. Annual Payment Plan The premium must be paid in full prior to the inception date of the policy.
- 2. Semi-Annual Payment Plan -60% of the premium must be paid prior to the policy inception date and one installment of 40% is due six months after inception.
- 3. Quarterly Payment Plan -35% of the premium must be paid prior to the policy inception date, with second and third quarterly payments of 25% each and a final quarterly payment of 15%.

No finance charges or fees apply to these payment plans. The option to pay premium on other than the Annual Payment Plan may be withdrawn by the Company if the insured has failed to make premium payments when due.

B. Rules

II. STATE EXCEPTIONS

A. Policy Issuance

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No finance charges or fees apply to these payment plans. The option to pay premium on other than the Annual Payment Plan may be withdrawn by the Company if the insured has failed to make premium payments when due.

B. Rules

1. Section 2, Physicians & Surgeons Specialty Classifications & Codes, is amended as follows:

	Industry Class Code		
<u>Specialties</u>	No <u>Surgery</u>	Minor <u>Surgery</u>	Major <u>Surgery</u>
Cardio-Thoracic Surgery			80141
General Practice	80420(B)	80423	
General Surgery Consultation	80143(B)		
Gynecology		80277(B)	
Hematology/Oncology	80473(B)		
Infectious Disease	80246		
Internal Medicine		80284(B)	
Internal Medicine – Allergy	80254(B)		
Internal Medicine-Cardiology		80281(D)	
Internal Medicine-Cardiovascular Disease	80255(B)	80281(E)	
Internal Medicine-Endocrin	80238(B)		
Internal Medicine-Gastroenterology		80274(C)	
Internal Medicine-Nephrology	80260(B)		

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Cover Letter All Filings

Comments: Attachment:

Pay Plan cover letter.PDF

Item Status: Status

Date:

Bypassed - Item: Consulting Authorization

Bypass Reason: N/A

Comments:

Item Status: Status

Date:

Bypassed - Item: Actuarial Certification (P&C)

Bypass Reason: N/A - Rule filing

Comments:

Item Status: Status

Date:

Bypassed - Item: District of Columbia and

Countrywide Experience for the

Last 5 Years (P&C)

Bypass Reason: N/A

Comments:

Item Status: Status

Date:

Bypassed - Item: District of Columbia and

Countrywide Loss Ratio Analysis

(P&C)

Filing Company: NCRIC, Inc. State Tracking Number:

Company Tracking Number: DC-PP-0708

TOI: 11.1 Medical Malpractice - Claims Made Only Sub-TOI: 11.1023 Physicians & Surgeons

Product Name: Health Care Professional Rates and Rules Manual

Project Name/Number: Payment Plans/

Bypass Reason: N/A

Comments:

Item Status: Status

Date:

Bypassed - Item: Schedule of Rates or Methodology

(P&C)

Bypass Reason: N/A

Comments:

Honorable Thomas E. Hampton, Commissioner Department of Insurance, Securities & Banking 810 First Street NE, Suite 701 Washington, DC 20002

Attn: Clark Simcock

RE: ProAssurance Group

NCRIC, Inc. - NAIC 41149

Health Care Professionals Rates and Rules Manual

Filing Number DC-PP-0708

Dear Mr. Simcock:

I submit for your review and approval the premium payment plans for the Health Care Professionals Rates and Rules Manual, which is used for physicians, surgeons, dentists and allied health professionals. Please find attached the manual pages that will be used for the dental program and the physicians and surgeons program. I request the effective date of July 1, 2008 for this filing submission.

If you have any questions or need anything further, please contact me at (800) 282-6242, ext. 4426 or email me at lgoodwin@proassurance.com.

Sincerely,

LaQuita B. Goodwin Compliance Specialist

Enclosures